

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIMS FEE CALCULATION SHEET (FOR USPTO FORM 10-375)						SERIAL NO.		FILING DATE	
CLAIMS						APPLICANT			
AS FILED		AFTER TRANSFERRING		AFTER RE-AMENDMENT					
IND.	DEF.	IND.	DEF.	IND.	DEF.				
1						51			
2						52			
3						53			
4						54			
5						55			
6						56			
7						57			
8						58			
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10						60			
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13						63			
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41						91			
42						92			
43						93			
44						94			
45						95			
46						96			
47						97			
48						98			
49						99			
50						100			
TOTAL						TOTAL			
IND.						IND.			
DEF.						DEF.			
TOTAL						TOTAL			